

BEST AVAILABLE COPY

| POSITION    | ID NO. | DATE     |
|-------------|--------|----------|
| CLASSIFIER  |        |          |
| EXAMINER    | 800    | 11-20-96 |
| TYPIST      | mc     | 11-25    |
| VERIFIER    |        |          |
| CORPS CORR. |        |          |
| SPEC. HAND  |        |          |
| FILE MAINT. |        |          |
| DRAFTING    |        |          |

## INDEX OF CLAIMS

| Claim | Final | Original | Date        |
|-------|-------|----------|-------------|
| 1     | 3     | 10       | 5 2 7 9 1 1 |
| 2     | 13    | 6        | 4 7 8 9 1 1 |
| 3     | 9     | 7        | 6 7 8 9 0 0 |
| 4     | 0     | 8        | 7 8 9 0 0 0 |
| 5     | 0     | 9        | 8 9 0 0 0 0 |
| 6     | 0     | 0        | 9 0 0 0 0 0 |
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## SYMBOLS

|                    |              |
|--------------------|--------------|
| ✓                  | Rejected     |
| =                  | Allowed      |
| - (Through number) | Canceled     |
| +                  | Restricted   |
| N                  | Non-elected  |
| I                  | Interference |
| A                  | Appeal       |
| O                  | Objected     |

| Claim | Date |
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